



Lake Oroville Area Recreation Survey

2002 -2003



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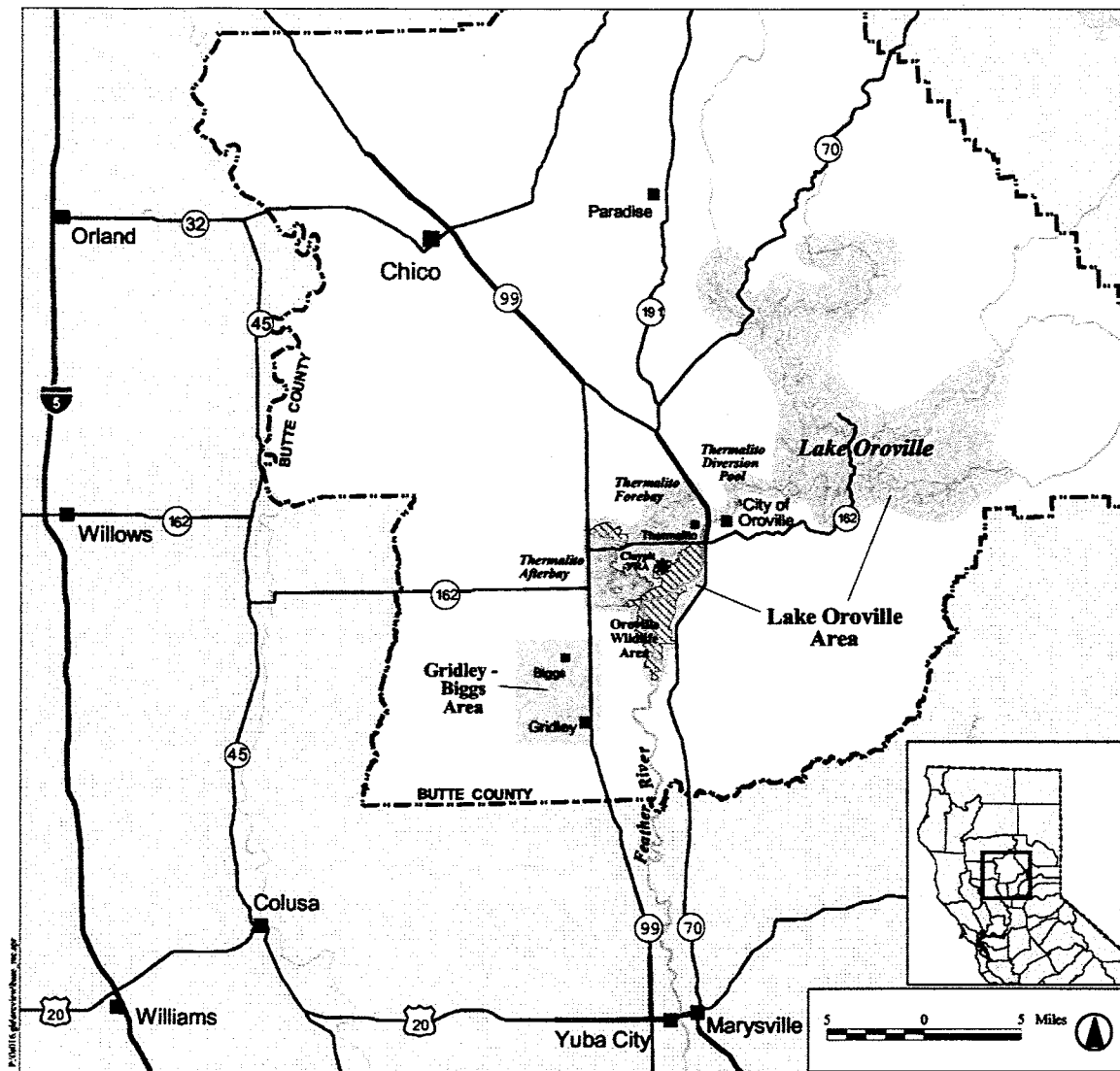
*Resident of Butte County
Mail Back Survey*

2002 – 2003

**California Department of
Water Resources**



Lake Oroville Area and Surrounding Communities



INSTRUCTIONS

This questionnaire has 4 parts:

Part A: **Transportation and Accommodations** used on your recent trip.

Part B: **Equipment** used for recreation on your recent trip.

Part C: **Expenditures** made on your recent trip.

Part D: **Recreation Activities and Experiences** on your recent trip.

Throughout this survey, the term “recent trip” refers to the trip to the Lake Oroville Area that you were on when you agreed to participate in this survey. Our records indicate you were interviewed on _____ at _____.

Many of the questions in this questionnaire refer to the Lake Oroville Area and surrounding communities in Butte County. These areas are shown on the map on the opposite page.

PLEASE NOTE: IT IS VERY IMPORTANT THAT ONLY THE PERSON WHO IS LISTED ON THE ADDRESS LABEL FILL OUT THIS QUESTIONNAIRE.

PART A: TRANSPORTATION AND ACCOMMODATIONS

1. During your recent trip to the Lake Oroville Area, which of the following modes of transportation did you use to get to the area? (**Check all that apply**)
 - ☐ AUTOMOBILE, TRUCK, OR VAN NOT USED FOR CAMPING
 - ☐ AUTOMOBILE, TRUCK, OR VAN PULLING A TRAILER
 - ☐ CAMPING VEHICLE (RV, motorhome, van conversion, etc.)
 - ☐ BUS
 - ☐ MOTORCYCLE
 - ☐ BICYCLE
 - ☐ OTHER (e.g. train, airplane, boat, etc.—please describe: _____)

2. On your recent trip to the Lake Oroville Area, did you stay at least one night away from home? (**Check correct answer**)
 - ☐ YES
 - ☐ NO ➡ skip to Part B (Equipment)

3. What type of accommodations did you use during your recent trip to the Lake Oroville Area? (**Check all that apply**)
 - ☐ MOTEL/HOTEL
 - ☐ BED AND BREAKFAST

☐ SECOND HOME

(If you checked this response, please answer the following two questions)

Where is this second home? _____

How many days per year do you usually spend at this second home? _____ days

☐ OTHER RENTED ACCOMODATIONS

(cabin, cottage, condo, guest home)

☐ FRIEND OR RELATIVE'S HOME

☐ RENTED RECREATIONAL VEHICLE

(including trailers, pop-ups, etc.)

☐ PERSONAL RECREATIONAL VEHICLE

☐ TENT/CAMPER TRAILER

☐ TENT

☐ BOAT (including houseboat)

☐ OTHER (please describe: _____)

PART B. EQUIPMENT

4. Below is a list of equipment people sometimes take with them to recreation areas. In the 1st column of boxes, please check all equipment items that you own. In the 2nd column of boxes, please check all equipment that you brought on your recent trip to the Lake Oroville Area. In the last column of boxes, please indicate the approximate amount that you've personally spent (both purchasing and maintaining) on each of these equipment items **over the past 12 months**.

Equipment Item	Do You Own?	Did You Bring on Recent Trip?	Approx. \$ Spent Over the Past 12 Months
A. MOTORIZED BOAT	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
B. NON-MOTORIZED BOAT (canoe, kayak, row, sail, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
C. BOAT TRAILER	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
D. HORSE TRAILER	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
E. WATERSKIING EQUIPMENT	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
F. PERSONAL WATERCRAFT (jet skis)	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
G. CAMPING VEHICLE (motorhome, van or bus, travel trailer, truck camper, 5 th wheel, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
H. MOTORCYCLE	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
I. BICYCLE	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
J. OFF-ROAD VEHICLE (three-wheels, trail bikes, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
K. FISHING EQUIPMENT	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
L. HUNTING EQUIPMENT	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
M. BACKPACKING EQUIPMENT	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
N. PHOTOGRAPHY EQUIPMENT	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
O. CAMPING EQUIPMENT	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
P. ALL OTHER MAJOR EQUIPMENT (surfboards, hang gliders, windsurfers, aircraft) – please list	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
1. _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>
2. _____	<input type="checkbox"/>	<input type="checkbox"/>	\$ <input type="text"/>

PART C. EXPENDITURES ON RECENT TRIP

This section includes a list of goods and services that people purchase when on a recreation-related trip. Please tell us how much you spent on each item on your recent trip. Because where you spend your money is important to understanding how recreation-related activity affects the local economy, we ask you to estimate your spending by location where the spending occurred. The locations include 1) at home, preparing for the trip, 2) within selected communities/cities in Butte County, and 3) onsite at Lake Oroville Area. An EXAMPLE TRIP is described below.

PLEASE NOTE:

- If you were sharing expenses with others, we just want to know about your own expenses.
- If you were paying expenses for other people in your group as well, please list all the expenses you paid and indicate below how many people including yourself that you were paying for.

5. PLEASE INDICATE THE NUMBER OF PEOPLE INCLUDING YOURSELF THAT YOU WERE PAYING EXPENSES FOR: ____ people

EXAMPLE TRIP

You and your spouse live in Chico and spent three days recreating at Lake Oroville. You spent two nights camping at Loafer Creek Campground. You paid for all expenses, including groceries (\$47), gasoline (\$25), and fishing supplies (\$33) for the trip in Chico; campground fees for two nights (\$34) at Loafer Creek Campground; and souvenirs (\$21) at a gift shop in the City of Oroville. You would complete this section as shown in the EXAMPLE portion of the table on the following page.

TYPE OF EXPENSE	PREPARING FOR TRIP (AT HOME)	TRAVELING TO AND FROM THE LAKE OROVILLE AREA					ONSITE AT LAKE OROVILLE AREA
		Oroville (including Thermalito)	Paradise	Gridley/ Biggs Area	Chico	Elsewhere in Butte County	
Lodging							
EXAMPLE: <u>camped 2 nights at Loafer Creek</u>	\$	\$	\$	\$	\$	\$	\$ 34
- hotels/motels/inns.....	\$	\$	\$	\$	\$	\$	\$
- rental homes	\$	\$	\$	\$	\$	\$	\$
- camping.....	\$	\$	\$	\$	\$	\$	\$
- other	\$	\$	\$	\$	\$	\$	\$
Food & Beverages							
EXAMPLE: <u>grocery supplies</u> in Chico	\$	\$	\$	\$	\$	\$ 47	\$
- purchased at food stores	\$	\$	\$	\$	\$	\$	\$
- purchased at restaurants.....	\$	\$	\$	\$	\$	\$	\$
Transportation							
EXAMPLE: <u>gas</u> for family car in Chico	\$	\$	\$	\$	\$	\$ 25	\$
- vehicle rental	\$	\$	\$	\$	\$	\$	\$
- vehicle gas and oil	\$	\$	\$	\$	\$	\$	\$
- vehicle repair/service.....	\$	\$	\$	\$	\$	\$	\$
- parking fees and tolls.....	\$	\$	\$	\$	\$	\$	\$
- boat gas and oil.....	\$	\$	\$	\$	\$	\$	\$
- boat repair and service.....	\$	\$	\$	\$	\$	\$	\$
- bus fares	\$	\$	\$	\$	\$	\$	\$
- other (e.g., air fare, train fare, boat fares other than fishing charters).....	\$	\$	\$	\$	\$	\$	\$
Activities/Entertainment							
EXAMPLE: <u>fishing supplies</u> in Chico	\$	\$	\$	\$	\$	\$ 33	\$
- fishing/hunting: licenses.....	\$	\$	\$	\$	\$	\$	\$
- fishing: boat charters	\$	\$	\$	\$	\$	\$	\$
- fishing/hunting: bait, supplies, equipment.....	\$	\$	\$	\$	\$	\$	\$
- other rec equipment <u>purchased for this trip</u> (tents, sleeping bags, sporting equipment)	\$	\$	\$	\$	\$	\$	\$
Miscellaneous Spending							
EXAMPLE: <u>souvenirs</u> at gift shop in City of Oroville	\$	\$	\$ 21	\$	\$	\$	\$
- film purchases/developing.....	\$	\$	\$	\$	\$	\$	\$
- clothing.....	\$	\$	\$	\$	\$	\$	\$
- souvenirs/gifts	\$	\$	\$	\$	\$	\$	\$
- personal services	\$	\$	\$	\$	\$	\$	\$
- other (please specify: _____)	\$	\$	\$	\$	\$	\$	\$

IMPORTANT

6. Do you feel that the estimates you provided for your recent trip to the Lake Oroville Area were (check one):
- ☐ Very accurate for most items
 - ☐ Reasonably accurate for most items
 - ☐ Not very accurate for most items

PART D. YOUR RECREATION ACTIVITIES

7. Were there recreation activities or special events **NOT** offered in the Lake Oroville Area that you would like to do?

☐ No, all the opportunities I wanted were offered

☐ Yes. ➡ If yes, which activities:

_____	_____
_____	_____
_____	_____

8. Below is a list of recreation places in northern California. Please indicate the places you have visited for recreation *in the past 12 months*. (Check all that apply)

<input type="checkbox"/> Lake Almanor	<input type="checkbox"/> Yuba River
<input type="checkbox"/> Butt Valley Lake	<input type="checkbox"/> Pit River
<input type="checkbox"/> San Francisco Bay/Delta Area	<input type="checkbox"/> Lake Tahoe
<input type="checkbox"/> Bucks Lake	<input type="checkbox"/> Trinity Lake
<input type="checkbox"/> Eagle Lake	<input type="checkbox"/> Lassen Volcanic National Park
<input type="checkbox"/> Lake Davis	<input type="checkbox"/> Lake Berryessa
<input type="checkbox"/> Little Grass Valley Reservoir	<input type="checkbox"/> Folsom Lake
<input type="checkbox"/> Honey Lake	<input type="checkbox"/> South Fork American River
<input type="checkbox"/> Lake Britton	<input type="checkbox"/> Stoney Gorge Reservoir
<input type="checkbox"/> Lake Shasta	<input type="checkbox"/> Black Butte Lake
<input type="checkbox"/> Lassen National Forest rivers and lakes	<input type="checkbox"/> Antelope Lake
<input type="checkbox"/> Plumas National Forest rivers and lakes	<input type="checkbox"/> Frenchman Lake
<input type="checkbox"/> Middle Fork Feather River	<input type="checkbox"/> Whiskeytown Lake
<input type="checkbox"/> South Fork Feather River	<input type="checkbox"/> Lower Feather River
<input type="checkbox"/> North Fork Feather River	<input type="checkbox"/> Other _____
<input type="checkbox"/> Sacramento River	<input type="checkbox"/> Other _____

9. Did you visit any of the above places on your recent trip to the Lake Oroville Area?

- ☐ No.
- ☐ Yes. If yes, indicate which places from above:

_____	_____
_____	_____
_____	_____

10. We are interested in the type of recreation opportunity you think should be provided in the Lake Oroville Area. For each of the following items, please indicate the type of opportunity you would prefer for this recreation area. **(Check one box per item)**

A. Opportunity to experience solitude versus opportunity to affiliate with other groups:

- ☐ Solitude is extremely important
- ☐ Solitude is very important
- ☐ Solitude is important
- ☐ Solitude and affiliation are equally important
- ☐ Affiliation with other groups is important
- ☐ Affiliation with other groups is very important
- ☐ Affiliation with other groups is extremely important

B. Opportunity to experience risk and challenge from the natural environment is:

- ☐ Extremely important
- ☐ Very important
- ☐ Important
- ☐ Somewhat important
- ☐ Not important

C. Opportunity to use outdoor wilderness skills is:

- ☐ Extremely important
- ☐ Very important
- ☐ Important
- ☐ Somewhat important
- ☐ Not important

D. The sights and sounds of civilization should be:

- ☐ Absent
- ☐ Rare
- ☐ Unusual
- ☐ Common
- ☐ Dominant

E. The landscape should be:

- ☐ Totally natural in appearance
- ☐ Predominantly natural in appearance
- ☐ Modified on a small scale
- ☐ Significantly modified

11. The following question lists things you might or might not have experienced on your recent trip to the Lake Oroville Area. For each item below, indicate how much of a problem you think the issue was at (the recreation area where you were surveyed):

If you are uncertain about an item or the item does not apply, check "N/A." (Check the appropriate box for each item.)

Experience	A big problem	A moderate problem	A slight problem	Not a problem	N/A
<i>Management</i>					
Litter along the shoreline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sanitation along the shoreline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cost to use facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall safety and security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Availability of service/staffing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequate information/warnings provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adequacy of landscaping of facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access to the shoreline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Law enforcement presence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Encounters between trail users and other users	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Water Conditions</i>					
Exposed land during lower water levels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shallow areas during lower water levels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floating debris in the water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water level fluctuations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>User Interactions</i>					
Numbers of watercraft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Noise from boats and personal watercraft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Boat speed or wake effects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Encounters between water skiers and others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Encounters between pleasure boaters & boat anglers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Encounters between PWCs (jetski/waverunner) and other users	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unsafe behavior by other users	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Numbers of people at developed facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Use of alcohol by other users	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Encounters between visitors and residents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. How do you evaluate the following facilities at the recreation area where you were surveyed on your recent trip? Remember, each item listed pertains only to the recreation area where you were surveyed. If you are uncertain about an issue, or it does not apply, check "N/A." (Check the appropriate box for each item)

Type of Facility	Too Few	About Right	Too Many	N/A
<i>Trail Use Related</i>				
Number of unpaved bike trails	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of hiking trails	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of signs indicating trail locations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of paved bike trails	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of equestrian trails	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Camping Related</i>				
Presence of campground hosts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of campgrounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of campsites with RV hookups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of group campsites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screening between campsites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of floating campsites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of shower facilities at campgrounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Boat Related</i>				
Number of boat ramps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of docks or temporary moorage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of boat-in primitive campsites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of boat-in campsites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of marinas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of boat-in gas stations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Fishing/Hunting Related</i>				
Number of fish cleaning stations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of habitat for hunting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lands for hunting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Other Activity Related</i>				
Number of group picnic sites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amount of swim areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of equestrian facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of developed day use or picnic areas along the shore	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of interpretive programs/educational opportunities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of restrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Overall, on your recent trip to the Lake Oroville Area, how satisfied were you with your recreation experience? (**Check one**)

- ☐ Extremely dissatisfied
- ☐ Very dissatisfied
- ☐ Dissatisfied
- ☐ Somewhat dissatisfied
- ☐ Neither dissatisfied or satisfied
- ☐ Somewhat satisfied
- ☐ Satisfied
- ☐ Very satisfied
- ☐ Extremely satisfied

14. Do you have any other comments you would like to make?

THANK YOU FOR COMPLETING THIS SURVEY. To return the survey, simply seal the questionnaire in the enclosed envelope and mail. Return postage is provided.